



POSITION TASK BOOK FOR THE POSITION OF

ALL-HAZARD SAFETY OFFICER

Version: March 2010

POSITION TASK BOOK ASSIGNED TO:
INDIVIDUAL'S NAME, AHIMT NAME, AND PHONE NUMBER
POSITION TASK BOOK INITIATED BY:
OFFICIAL'S NAME, TITLE, AND PHONE NUMBER
DATE THAT THE POSITION BOOK WAS INITIATED:
MONTH, DAY, YEAR

Indiana Department of Homeland Security
Joseph E. Wainscott, Jr., Executive Director
Indiana Government Center South
302 West Washington Street, Room E208
Indianapolis, IN 46204

EVALUATORDO NOT COMPLETE THIS UNLESS YOU ARE RECOMMENDING THE TRAINEE FOR

VERIFICATION/QUALIFICATION OF COMPLETED POSITION TASK BOOK FOR THE POSITION OF
<i>FINAL EVALUATOR'S VERIFICATION</i> I verify that all tasks have been performed <u>and</u> are documented with appropriate initials. I also verify that _____ has performed as a trainee and should therefore be considered for qualification in this position.
FINAL EVALUATOR'S SIGNATURE AND DATE
EVALUATOR'S PRINTED NAME, TITLE, DUTY STATION, AND PHONE NUMBER

AGENCY HEAD RECOMMENDATION FOR CERTIFICATION I certify that _____ has met all requirements for qualification in this position and I recommend that they be credentialed for the position.
OFFICIAL'S SIGNATURE AND DATE
OFFICIAL'S NAME TITLE, DUTY STATION, AND PHONE NUMBER

DISTRICT RESPONSE TASK FORCE COMMANDER RECOMMENDATION FOR QUALIFICATION I certify that _____ has met all requirements for qualification in this position and I recommend that they be credentialed for the position.
OFFICIAL'S SIGNATURE AND DATE
OFFICIAL'S NAME, TITLE, AGENCY, AND PHONE NUMBER

INCIDENT MANAGEMENT SYSTEM POSITION TASK BOOK

Position Task Books (PTB) were developed for designated positions as described under the National Interagency Incident Management System (NIIMS) and have been incorporated into the National Incident Management System (NIMS). The position task book is used by the State of Indiana to qualify that the person to whom the task book belongs meets the standards recommended by the National (NIMS) Integration Center (NIC).

Each PTB lists the performance requirements (tasks) for the specific position in a format that allows a trainee to be evaluated against written guidelines. Successful performance of all tasks, as observed and recorded by a Qualified Evaluator, will result in a recommendation that the trainee be qualified in that position. Evaluation and confirmation of the individual's performance of all the tasks may involve more than one evaluator and can occur on incidents, in classroom simulation, and in other work situations. Designated PTBs require position performance during which the majority of required tasks are demonstrated on a single incident. It is important that performance be critically evaluated and accurately recorded by each evaluator. All tasks must be evaluated. All bullet statements within a task that require an action (contain an action verb) must be demonstrated before that task can be signed off.

A brief list of responsibilities also appears below.

RESPONSIBILITIES:

1. The **Agency Management** is responsible for:
 - Selecting trainees based on the needs of their organization or area Incident Management Teams.
 - Providing opportunities for evaluation and/or making the trainee available for evaluation.
2. The **Individual** is responsible for:
 - Reviewing and understanding instructions in the PTB.
 - Identifying desired objectives/goals.
 - Providing background information to an evaluator.
 - Satisfactorily demonstrating completion of all tasks for an assigned position within three years.
 - Assuring the evaluation record is complete.
 - Notifying the local agency head when the PTB is completed, and obtaining their signature recommending qualification.
3. The **Evaluator** is responsible for:
 - Being qualified and proficient in the position being evaluated.
 - Meeting with the trainee and determining past experience, current qualifications, and desired objectives/goals.
 - Reviewing tasks with the trainee.
 - Explaining to the trainee the evaluation procedures that will be utilized and which objectives may be attained.

- Identifying tasks to be performed during the evaluation period.
 - Accurately evaluating and recording demonstrated performance of tasks. Dating and initialing completion of the task shall document satisfactory performance. Unsatisfactory performance shall be documented in the Evaluation Record.
 - Completing the Evaluation Record found at the end of each PTB.
4. The **Final Evaluator** is responsible for signing the verification statement inside the front cover of the PTB when all tasks have been initialed.
5. The **Agency Head** or designee is responsible for:
- Tracking progress of the trainee.
 - Identifying incident evaluation opportunities.
 - Identifying and assigning an evaluator that can provide a positive experience for the trainee, and make an accurate and honest appraisal of the trainee's performance.
 - Documenting the assignment.
 - Conducting progress reviews.
 - Conducting a closeout interview with the trainee and evaluator and assuring that documentation is proper and complete.

Competency 1: Assume position responsibilities

Description: Successfully assume role of Safety Officer and initiate position activities at the appropriate time according to the following behaviors.

Behavior 1: Ensure readiness for assignment.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
<p>1. Obtain and assemble information and materials needed for kit. Kit will be assembled and prepared prior to receiving an assignment. Kit will contain critical items needed for the assignment and items needed for functioning during the first 48 hours. Kit will be easily transportable and within agency weight limitations. The basic information and materials needed <u>may include</u>, but is not limited to, any of the following:</p> <p>Reference Material</p> <ul style="list-style-type: none"> • Reference materials appropriate to the incident type (e.g., PMS 410-1, Fireline Handbook). • Field Operations Guide ICS 420-1. • Agency health and safety code handbook. • Safety checklists. <p>Forms</p> <ul style="list-style-type: none"> • ICS Form 213, General Message. • ICS Form 214, Unit Log. • ICS Form 215A, Incident Safety Analysis. • Injury and accident forms. <p>Supplies</p> <ul style="list-style-type: none"> • Safety Officer's identity strip. • 100-ft tape. • Flagging (several colors). • Clipboard. • Writing tablet. • Graph paper/carbon paper. • Flashlight and batteries. • Pencils and assortment of magic markers. • Pocket notebook. • Camera and several rolls of ASA 400 rated film (color print, slide, no Polaroid). • Hand-held tape recorder and extra batteries. • Compass. • Clinometer or Abney level. 	O		

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<ul style="list-style-type: none"> • Alarm clock. • Thermometer and wind gauge/belt weather kit. • Light day pack. • Personal protective equipment (PPE). • Whistle. • Chalk • Binoculars. 			
2. Arrive properly equipped at incident assigned location within acceptable time limits. Check in according to agency guidelines.	I		

Behavior 3: Ensure availability, qualifications, and capabilities of resources to complete assignment.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Ensure sufficient Assistant Safety Officers (AS Os) to complete necessary tasks. <ul style="list-style-type: none"> • Identify need for ASOs. • Order ASOs. • Assign ASOs. • Supervise ASOs. 	I		

Behavior 4: Gather, update, and apply situational information relevant to the assignment.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Gather information necessary to assess incident assignment and determine immediate needs and actions. <ul style="list-style-type: none"> • Incident Commander's/supervisor's name, location. Make contact. • Current resource commitments. • Current and anticipated situation (hazardous materials, urban interface, etc.). • Expected duration of assignment. 	I		

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Behavior 5: Establish effective relationships with relevant

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Establish and maintain positive interpersonal and interagency working relationships.	I		
2. Create a work environment that provides diversity and equal opportunity for all personnel assigned to the incident.	I		
3. Recognize functional capabilities of cooperating entities.	I		
4. Proactively work with necessary personnel to collect information and further the investigation process.	I		

Behavior 7: Understand and comply with ICS concepts and principles.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Maintain appropriate span of control.	I		
2. Demonstrate knowledge of ICS structure, principles, positions, and ICS forms.	I		
3. Act as agent of the Incident Commander.	I		

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Competency 2: Lead assigned personnel

Description: Influence, guide, and direct assigned personnel to accomplish objectives and desired outcomes in a rapidly changing, high-risk environment.

Behavior 1: Model leadership principles of Duty, Respect and Integrity.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Exhibit principles of duty. <ul style="list-style-type: none">• Be proficient in your job, both technically and as a leader.• Make sound and timely decisions.• Ensure that tasks are understood, supervised and accomplished.• Develop your subordinates for the future.	I		
2. Exhibit principles of respect. <ul style="list-style-type: none">• Know your subordinates and look out for their well-being.• Keep your subordinates informed.• Build the team.• Employ your subordinates in accordance with their capabilities.	I		
3. Exhibit principles of integrity. <ul style="list-style-type: none">• Know yourself and seek improvement.• Seek responsibility and accept responsibility for your actions.• Set the example.	I		

Behavior 2: Ensure the safety, welfare, and accountability of assigned

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Recognize potentially hazardous situations.	I		
2. Inform subordinates of hazards.	I		
3. Ensure that special precautions are taken when extraordinary hazards exist.	I		
4. Ensure adequate rest is provided to all unit personnel.	I		

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Behavior 3: Establish work assignments and performance expectations, monitor performance, and provide feedback.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Brief and keep subordinates informed and updated.	I		
3. Assign Safety assistants to monitor potentially high-hazard areas or operations that will be considered to be of high risk.	I		
3. Initiate accident investigation team for those accidents that occur within the incident area.	I		
4. Provide counseling and discipline as needed.	I		
5. Ensure that performance ratings are completed as required by the Incident Commander/Agency Administrator.	I		

Behavior 5: Coordinate interdependent activities.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Interact and coordinate with all command and general staff. <ul style="list-style-type: none">• Receive and transmit current and accurate information.• Work directly with Medical Unit Leader on Incident Medical Plan ICS 206.	I		

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Competency 3: Communicate effectively

Description: Use suitable communication techniques to share relevant information with appropriate personnel on a timely basis to accomplish objectives in a rapidly changing, high risk environment.

Behavior 1: Ensure all relevant information is exchanged during check-in, briefings and debriefings.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Discuss ICS 21 5A at operational briefings as appropriate.	I		
2. Prepare and present safety briefing. <ul style="list-style-type: none">• Present a safety briefing at each briefing session.• Briefing should contain information to alert incident personnel of potential risk/hazard considered to be most critical.• Answer any questions that may arise.	I		
3. Conduct debriefing with off-duty personnel.	I		
4. Debrief with incident Field Observers. <ul style="list-style-type: none">• Meet with the incident Field Observer(s) to obtain information on potential high-hazard areas or operations that will be considered to be of high risk.• Use this information in preparation of safety messages and for discussions at briefings.• Safety assistants will be assigned to monitor these areas or operations.	I		
5. Participate in agency debriefing or closeout as appropriate. <ul style="list-style-type: none">• As directed by the Incident Commander, provide a debriefing to the Agency Administrator regarding incident safety history, including accidents, hazards, corrective actions, and commendations.	I		

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Behavior 2: Ensure documentation is complete and disposition is appropriate.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Complete ICS Form 214 for each operational period. <ul style="list-style-type: none"> Document incidents of a serious nature in the ICS Form 214, Unit Log. 	I		
2. Ensure that accident investigation report(s) is/are complete and provided to Incident Commander and local agency.	I		
3. If required, ICS Form 221 (Demobilization Check-Out) is completed and turned in to the appropriate person.	I		
4. Complete ICS 21 5A for each operational period.	I		
5. Ensure copies of 21 5A are included in documentation package.	I		

Behavior 3: Gather, produce and distribute information as required by established guidelines and ensure understanding by recipient.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Prepare safety messages for the incident.	I		
2. Post safety information on incident bulletin board if appropriate.	I		
3. Prepare narrative or special reports. <ul style="list-style-type: none"> When requested by the incident agency and/or Incident Commander, prepare narrative report of incident. Include the following items: number of injuries and accidents, general safety situation and problems encountered, description of significant incidents or unsafe situations and recommendations for corrective action. 	I		

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4. Distribute accident investigation reports and initiate follow-up action. <ul style="list-style-type: none"> Follow up to see that all accident investigation reports are completed and include all required information. Distribute copies of the report to the Incident Commander and finance position assigned as appropriate. Recommend need for corrective action based on findings of the report to the Incident Commander. Initiate immediate corrective action, if necessary. Distribute information concerning accidents to Incident Commander. 	I		
5. Communicate to incident personnel any change in weather conditions during the operational period that was not predictable and could cause high risk conditions.	I		

Behavior 4: Communicate and assure understanding of work expectations within the chain of command and across functional areas.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Ensure that Assistant Safety Officers understand their roles and responsibilities for carrying out the safety mission during the incident.	I		
2. Ensure incident management team members are aware of the safety-related aspects of their jobs and undertake their job responsibilities in a safe manner based on expected duration, size, type of incident, potential values to be protected, and jurisdictional involvement.	I		

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Behavior 5: Develop and implement plans and gain concurrence of affected agencies and the public.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Develop or implement a safety action plan. <ul style="list-style-type: none">• Ensure that hazards and risks are identified and adequately monitored for the duration of the incident.• Share action plan with the Incident Commander and incident staff and revise as necessary.• Ensure any changes in incident hazards and risks with relevant corrective actions are reflected in the safety action plan, safety messages, and/or safety briefings as appropriate.• Coordinate elements of the safety action plan to the IAP.	I		

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Competency 4: Ensure completion of assigned actions to meet identified objectives

Description: Identify, analyze, and apply relevant situational information and evaluate actions to complete assignments safely and meet identified objectives. Complete actions within established timeframe.

Behavior 1: Administer and/or apply agency policy, contracts and agreements.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Monitor vehicle/operator operational periods. <ul style="list-style-type: none"> • Audit time and equipment records of drivers/vehicles to ensure they have not exceeded the standards set by the agency on which the incident has occurred. • Operators that have been found to exceed these standards will be relieved immediately. • Document. 	I		

Behavior 2: Gather, analyze, and validate information pertinent to the incident or event and make recommendations for setting priorities.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Monitor food and sanitation conditions.	I		
2. Inspect potable water supplies. <ul style="list-style-type: none"> • Inspect potable water sources, hauling and storage containers. • Document any deficiencies identified and take corrective action. 	I		
3. Monitor incident personal protective equipment needs.	I		

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<p>4. Inspect incident facilities as appropriate.</p> <ul style="list-style-type: none"> • Conduct a general inspection of the base and camp facilities soon after they become operational and follow up on a periodic basis throughout the incident for compliance to all health and safety standards. • Identify and document all unsafe conditions and provide this information to the Incident Commander or the Base/Camp Manager. 	I		
<p>5. Review and approve medical plan as appropriate.</p> <ul style="list-style-type: none"> • Monitor plan to see that it addresses current status of incident. 	I		
<p>6. Ensure roads are inspected within the incident area.</p> <ul style="list-style-type: none"> • Ensure that an inspection has been done on all roads that will be used for the transportation of personnel and equipment. • All roads must be of adequate width, grade, and maintenance condition to allow safe use by the vehicles being utilized on the incident. • Any roads that have been identified as unsafe for vehicle travel will be closed and monitored for unauthorized use. 	I		
<p>7. Monitor operational period lengths.</p> <ul style="list-style-type: none"> • Identify personnel exceeding the work standards established by the agency responsible for the incident. • Recommend corrective action to incident commander. • Ensure work/rest guidelines are followed. 	I		
<p>8. Monitor incident personnel for general welfare.</p> <ul style="list-style-type: none"> • Monitor personnel to determine if their needs are being met as related to food, water and rest. • Personnel identified as being high risk due to extreme fatigue or poor physical condition will be evaluated and discussed with Incident Commander, and agency representative for final resolution to problem. 	I		

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9. Monitor fire crews for PPE use. <ul style="list-style-type: none"> Visually check fire crew members preparing for duty to see that they are wearing or have all required PPE and other personal gear. Line workers that lack the PPE will be supplied such equipment prior to being transported to the line. 	I		
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Behavior 3: Prepare clear and concise assessments regarding hazards, fire behavior, weather and other relevant events.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Develop ICS 21 5A, Incident Safety Analysis, planning matrix. <ul style="list-style-type: none"> Complete ICS 21 5A for each operational period. Discuss ICS 21 5A at operational briefings as appropriate. 	I		
2. Conduct initial and ongoing assessments to gather information and determine incident safety needs.	I		

Behavior 4: Take appropriate action based on assessed risks.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Remove and identify tools and power equipment determined to be unsafe for use.	I		
2. Relieve immediately vehicles/operators that have exceeded operational period standards.	I		
3. Close any roads that have been identified as unsafe for vehicle travel and monitor for unauthorized use.	I		
4. Supply PPE to line workers that lack PPE prior to being transported to the line.	I		

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5. Initiate accident investigations within the incident area. <ul style="list-style-type: none"> Initiate accident investigation team for those accidents that occur within the incident area. Assure information, materials, the scene etc. are preserved to support a complete and thorough investigation of the accident. Ensure that accident investigation report is completed and provided to Incident Commander and local agency The investigation should not interfere with the primary duties of the Safety Officer. 	I		
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Behavior 5: Modify approach based on evaluation of incident situation.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Recognize limits of knowledge and seek advice or help on safety management as appropriate.	I		

Behavior 6: Anticipate, recognize and mitigate unsafe situations.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Identify potentially unsafe situations. <ul style="list-style-type: none"> Monitor all incident activities to identify any potentially unsafe situations. Take appropriate action by contacting the responsible supervisor for corrective action. If necessary, take direct action. Report to Incident Commander and General Staff any action affecting the Incident Action Plan. 	I		
2. Identify those risks or hazards with the highest potential for serious accident or injury. <ul style="list-style-type: none"> Identify those types of operations on an incident of this type that most frequently lead to serious injuries or fatalities. Discuss with Incident Commander. Identify actions needed to prevent an accident from taking place. 	I		

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3. Exercise emergency authority to stop and prevent unsafe acts. <ul style="list-style-type: none"> Use direct intervention to correct any extremely dangerous act which is being performed outside of agency regulations, policies, standards, and guidelines. Discuss with Incident Commander and document action in ICS Form 214, Unit Log. 	I		
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Behavior 7: Follow established and safety procedures relevant to given assignment.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Perform assigned job duties in accordance with established safety procedures.	I		

Behavior 8: Ensure compliance with all legal and safety requirements relevant to air operations.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Monitor all air operations activities. <ul style="list-style-type: none"> Review compliance with agency flight duty limitations. Monitor to ensure that air safety requirements are being implemented and followed. Document all identified serious hazards or unsafe conditions. Corrective action will be implemented through the Incident Commander. 	I		
2. Review aircraft incidents/accident reports. <ul style="list-style-type: none"> Review on a daily basis all aircraft incident/accident reports. Monitor to see that recommended corrective action is implemented. 	I		

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Behavior 9: Ensure functionality of equipment

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Inspect hand tools and power equipment for unsafe conditions. <ul style="list-style-type: none">• Review on a periodic basis the condition of hand tools being received on the incident and those being reconditioned to determine they are safe for use.• Tool and power equipment determined to be unsafe for use will be removed from use and identified as such.	I		
2. Ensure inspection of vehicles, mechanical equipment, and driver/operator qualifications are completed. <ul style="list-style-type: none">• A periodic inspection of vehicles will be conducted to ensure they meet all mechanical and maintenance standards.• Ensure drivers/operators are properly trained and have a valid license to operate the vehicle/equipment assigned.• Deficiencies will be documented.	I		

Behavior 10: Plan for demobilization and ensure demobilization procedures are followed.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Receive demobilization instructions from supervisor. Brief subordinate staff on demobilization procedures and responsibilities as appropriate. <ul style="list-style-type: none">• Ensure that incident and agency demobilization procedures are followed.• If required, ICS Form 221 (Demobilization Check-Out) is completed and turned in to the appropriate person.• Ensure copies of 21 5A are included in documentation package.	I		

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Behavior 11: Transfer position duties while ensuring continuity of authority and knowledge and taking into account the increasing or decreasing incident complexity.

TASK	CODE	EVALUATION RECORD #	EVALUATOR
1. Determine with replacement time of transfer.	I		
2. Communicate transfer of command to operations and command staff.	I		
3. If necessary, coordinate with agencies about transfer of command back to local jurisdiction.	I		

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INSTRUCTIONS FOR COMPLETING THE EVALUATION RECORD

There are four separate blocks allowing evaluations to be made. These evaluations may be made on incidents, simulations in classroom, or depending on what the position task book indicates. This should be sufficient for qualification in the position if the individual is adequately prepared. If additional blocks are needed, a page can be copied from a blank task book and attached.

COMPLETE THESE ITEMS AT THE START OF THE EVALUATION PERIOD:

Evaluator's name, incident/office title, and agency: List the name of the Evaluator, his/her incident position or office title, and agency.

Evaluator's home unit address and phone: Self-explanatory

#: The number next to the evaluator's name in the upper left corner of the evaluation record identifies a particular incident or group of incidents. This number should be placed in the column labeled "Evaluation Record #" on the PTB for each task performed satisfactorily. This number will enable reviewers of the completed PTB to ascertain the qualifications of the different evaluators prior to making the appropriate sign-off on the PTB.

Location of Incident/Simulation: Identify the location where the tasks were performed by agency and office.

Incident Kind: Enter kind of incident; e.g., hazmat, wildland fire, structural fire, search and rescue, flood, tornado, etc.

COMPLETE THESE ITEMS AT THE END OF THE EVALUATION PERIOD:

Number and Type of Resources: Enter the number of resources and types assigned to the incident pertinent to the Trainee's task book position.

Duration: Enter inclusive dates during which the Trainee was evaluated. This block may indicate a span of time covering several small and similar incidents if the Trainee has been evaluated on that basis; e.g., several initial attack wildfires in similar fuel types.

Recommendation: Check as appropriate and/or make comments regarding the future needs for development of this trainee.

Date: List the date the record is being completed.

Evaluator's initials: Initial here to authenticate your recommendations and to allow for comparison with initials in the PTB.

Evaluator's relevant qualification: List your qualification relevant to the Trainee position you supervised.

Evaluation Record

TRAINEE NAME		TRAINEE POSITION	
#1	Evaluator's name: Incident/office title & agency:		
Evaluator's home unit address & phone:			
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)
			to
<p>The tasks initialed & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.</p> <p>The individual has successfully performed all tasks for the position and should be considered for qualification.</p> <p>The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p>Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.</p>			
Recommendations:			
Date: _____ Evaluator's initials: _____			
Evaluator's relevant agency qualification or rating: _____			

#2	Evaluator's name: Incident/office title & agency:		
Evaluator's home unit address & phone:			
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)
<p>The tasks initialed & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.</p> <p>The individual has successfully performed all tasks for the position and should be considered for qualification.</p> <p>The individual was not able to complete certain tasks (comments below) or additional guidance is required.</p> <p>Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the evaluation.</p> <p>The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.</p>			
Recommendations:			
Date: _____ Evaluator's initials: _____			
Evaluator's relevant agency qualification or rating: _____			

Evaluation Record
(Continuation Sheet)

TRAINEE NAME		TRAINEE POSITION	
#3	Evaluator's name: Incident/office title & agency:		
Evaluator's home unit address & phone:			
Name and Location of Incident or Situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)
			to
<p>The tasks initialed & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.</p> <p>The individual has successfully performed all tasks for the position and should be considered for qualification.</p> <p>The individual was not able to complete certain tasks (comments below) or additional guidance is</p> <p>Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the</p> <p>The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.</p> <p>Recommendations: _____</p> <p>_____</p> <p>Date: _____ Evaluator's initials: _____</p> <p>Evaluator's relevant agency qualification or rating: _____</p>			
#4	Evaluator's name: Incident/office title & agency:		
Evaluator's home unit address & phone:			
Name and Location of Incident or situation (agency & area)	Incident Kind (hazmat, tornado, flood, structural fire, wildfire, search & rescue, etc.)	Number & Type of Resources Pertinent to Trainee's Position	Duration (inclusive dates in trainee status)
			to
<p>The tasks initialed & dated by me have been performed under my supervision in a satisfactory manner by the above named Trainee. I recommend the following for further development of this Trainee.</p> <p>The individual has successfully performed all tasks for the position and should be considered for qualification.</p> <p>The individual was not able to complete certain tasks (comments below) or additional guidance is</p> <p>Not all tasks were evaluated on this assignment and an additional assignment is needed to complete the</p> <p>The individual is severely deficient in the performance of tasks for the position and needs further training (both required & knowledge and skills needed) prior to additional assignment(s) as a Trainee.</p> <p>Recommendations: _____</p> <p>_____</p> <p>Date: _____ Evaluator's initials: _____</p> <p>Evaluator's relevant agency qualification or rating: _____</p>			